

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Fresenius Medical Care North America PAC

ADDRESS (number and street)

801 Pennsylvania Avenue, NW

Suite 255

☐Check if different
than previously
reported. (ACC)

Washington

DC

20004

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00401299

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report (Q1)☐July 15
Quarterly Report (Q2)☐October 15
Quarterly Report (Q3)☐January 31
Quarterly Report (YE)☐July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☒

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post -Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 1

2 5

2 0 0 8

through

1 2

3 1

2 0 0 8

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Kathleen Smith

Signature of Treasurer

Electronically Filed by Kathleen Smith

Date

0 1

1 3

2 0 0 9

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	1	2	5	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2008		9114.46
(b) Cash on Hand at Beginning of Reporting Period	1609.57	
(c) Total Receipts (from Line 19)	5654.94	89953.92
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	7264.51	99068.38
7. Total Disbursements (from Line 31)	0.00	91803.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7264.51	7264.51
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Fresenius Medical Care North America PAC

Report Covering the Period:

From:

M	M
1	1

D	D
2	5

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	4642.31	80817.19
(i) Itemized (use Schedule A)		
(ii) Unitemized	1012.63	9136.73
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➡	5654.94	89953.92
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) ➡	5654.94	89953.92
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	5654.94	89953.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5654.94	89953.92

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	11.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	11.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	83792.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	8000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	8000.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	0.00	91803.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	0.00	91803.87

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	5654.94	89953.92
34. Total Contribution Refunds (from Line 28(d))	0.00	8000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5654.94	81953.92
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	11.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	11.87

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 15

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)

Debbie Arrington

Mailing Address 15011 W Columbine Drive

City

Surprise

State

AZ

Zip Code

85379-5936

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

Area Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.99

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C465

Amount of Each Receipt this Period

38.46

Receipt

Payroll Deduction: (38.46-
/Monthly)

B.

Full Name (Last, First, Middle Initial)

John Auletto

Mailing Address 981 Whispering Pines Dr

City

Turlock

State

CA

Zip Code

95382-0459

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.22

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C466

Amount of Each Receipt this Period

38.46

Receipt

Payroll Deduction: (38.46-
/Monthly)

C.

Full Name (Last, First, Middle Initial)

Charles E Brown

Mailing Address 4640 Glen Coe Street

City

Leesburg

State

FL

Zip Code

34748-2304

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

Clinical Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C513

Amount of Each Receipt this Period

60.00

Receipt

Payroll Deduction: (60.00-
/Monthly)

SUBTOTAL of Receipts This Page (optional)

136.92

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)

Claire Callahan

Mailing Address 1557 Surrey Dr

City

Wheaton

State

IL

Zip Code

60187-7248

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

VP of Human Resources

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1269.18

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 2 8 / 2 0 0 8

Transaction ID: 90113.C431

Amount of Each Receipt this Period

230.76

Receipt

Payroll Deduction: (230.7-
6/Monthly)

B.

Full Name (Last, First, Middle Initial)

Claire Callahan

Mailing Address 1557 Surrey Dr

City

Wheaton

State

IL

Zip Code

60187-7248

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

VP of Human Resources

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1615.32

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C471

Amount of Each Receipt this Period

346.14

Receipt

Payroll Deduction: (346.1-
4/Monthly)

C.

Full Name (Last, First, Middle Initial)

David Carter

Mailing Address 5215 Wiltonwood Ct

City

Indianapolis

State

IN

Zip Code

46254-9665

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

VP Operations

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C527

Amount of Each Receipt this Period

195.00

Receipt

Payroll Deduction: (195.0-
0/Monthly)

SUBTOTAL of Receipts This Page (optional)

771.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)

Simon D Castellanos

Mailing Address 2670 S Youngfield Ct

City

Denver

State

CO

Zip Code

80228-4937

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

Business Unit President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1269.40

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8

Transaction ID: 90113.C432

Amount of Each Receipt this Period

230.80

Receipt

Payroll Deduction: (230.8-
0/Monthly)

B.

Full Name (Last, First, Middle Initial)

Simon D Castellanos

Mailing Address 2670 S Youngfield Ct

City

Denver

State

CO

Zip Code

80228-4937

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

Business Unit President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1615.60

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C473

Amount of Each Receipt this Period

346.20

Receipt

Payroll Deduction: (346.2-
0/Monthly)

C.

Full Name (Last, First, Middle Initial)

Steven P Covino

Mailing Address 6 Williams Street

City

Waltham

State

MA

Zip Code

02453-4131

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

Director of Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.76

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C475

Amount of Each Receipt this Period

57.69

Receipt

Payroll Deduction: (57.69-
/Monthly)

SUBTOTAL of Receipts This Page (optional)

634.69

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)

Kathleen Crocker

Mailing Address 9 Kimball Ct

City

Burlington

State

MA

Zip Code

01803-3857

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
VP FMS Operations Sys Devlp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.46

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8

Transaction ID: 90113.C435

Amount of Each Receipt this Period

38.46

Receipt

Payroll Deduction: (38.46-
/Monthly)

B.

Full Name (Last, First, Middle Initial)

Kathleen Crocker

Mailing Address 9 Kimball Ct

City

Burlington

State

MA

Zip Code

01803-3857

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
VP FMS Operations Sys Devlp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

388.46

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C477

Amount of Each Receipt this Period

75.00

Receipt

Payroll Deduction: (75.00-
/Monthly)

C.

Full Name (Last, First, Middle Initial)

Carol A Ernst

Mailing Address 22370 N 64th Ave

City

Glendale

State

AZ

Zip Code

85310-4259

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
Area Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.98

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8

Transaction ID: 90113.C437

Amount of Each Receipt this Period

153.84

Receipt

Payroll Deduction: (76.92-
/Monthly)

SUBTOTAL of Receipts This Page (optional)

267.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)

Mark R Fawcett

Mailing Address 100 Franklin Street

City

Arlington

State

MA

Zip Code

02474-3214

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C533

Amount of Each Receipt this Period

114.00

Receipt

Payroll Deduction: (114.0-
0/Monthly)

B.

Full Name (Last, First, Middle Initial)

James Freedman

Mailing Address 269 Rolling Meadow

City

Holliston

State

MA

Zip Code

01746-1521

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
VP Leadership & Prof Dev

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C483

Amount of Each Receipt this Period

120.00

Receipt

Payroll Deduction: (120.0-
0/Monthly)

C.

Full Name (Last, First, Middle Initial)

Patrick C Guiney

Mailing Address 231 May Apple Lane

City

Alpharetta

State

GA

Zip Code

30005-6904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
VP Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8

Transaction ID: 90113.C439

Amount of Each Receipt this Period

38.46

Receipt

Payroll Deduction: (38.46-
/Monthly)

SUBTOTAL of Receipts This Page (optional)

272.46

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)

Patrick C Guiney

Mailing Address 231 May Apple Lane

City

Alpharetta

State

GA

Zip Code

30005-6904

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

VP Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.22

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C484

Amount of Each Receipt this Period

57.69

Receipt

Payroll Deduction: (57.69-
/Monthly)

B.

Full Name (Last, First, Middle Initial)

Matthew D Kinser

Mailing Address 1232 Old Spring Trl

City

Arrington

State

TN

Zip Code

37014-9120

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

VP Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C491

Amount of Each Receipt this Period

60.00

Receipt

Payroll Deduction: (60.00-
/Monthly)

C.

Full Name (Last, First, Middle Initial)

Brian H Lipinski

Mailing Address 4308 Castle Rock Ct

City

Irving

State

TX

Zip Code

75038-6438

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

923.04

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8

Transaction ID: 90113.C462

Amount of Each Receipt this Period

153.84

Receipt

Payroll Deduction: (153.8-
4/Monthly)

SUBTOTAL of Receipts This Page (optional)

271.53

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)

Brian H Lipinski

Mailing Address 4308 Castle Rock Ct

City

Irving

State

TX

Zip Code

75038-6438

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1153.80

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C531

Amount of Each Receipt this Period

230.76

Receipt

Payroll Deduction: (230.7-
6/Monthly)

B.

Full Name (Last, First, Middle Initial)

Patricia H Maurer

Mailing Address 343 Mariner Circle

City

Woodstock

State

GA

Zip Code

30189-5199

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
USV Director of Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C496

Amount of Each Receipt this Period

40.00

Receipt

Payroll Deduction: (40.00-
/Monthly)

C.

Full Name (Last, First, Middle Initial)

Robert McGorty

Mailing Address 2 Walter Circle

City

Westford

State

MA

Zip Code

01886-4533

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
VP Finance & Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1269.18

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8

Transaction ID: 90113.C446

Amount of Each Receipt this Period

230.76

Receipt

Payroll Deduction: (230.7-
6/Monthly)

SUBTOTAL of Receipts This Page (optional)

501.52

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 15

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)

Robert McGorty

Mailing Address 2 Walter Circle

City

Westford

State

MA

Zip Code

01886-4533

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

VP Finance & Admin

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1615.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: 90113.C497

Amount of Each Receipt this Period

346.14

Receipt

Payroll Deduction: (346.1-
4/Monthly)**B.**

Full Name (Last, First, Middle Initial)

Lawrence K Park

Mailing Address 2 Hilltop Drive

City

Peabody

State

MA

Zip Code

01960-3185

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

VP Health Safety & Risk Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.53

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	8

Transaction ID: 90113.C448

Amount of Each Receipt this Period

38.46

Receipt

Payroll Deduction: (38.46-
/Monthly)**C.**

Full Name (Last, First, Middle Initial)

Lawrence K Park

Mailing Address 2 Hilltop Drive

City

Peabody

State

MA

Zip Code

01960-3185

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

VP Health Safety & Risk Mgt

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	8

Transaction ID: 90113.C500

Amount of Each Receipt this Period

57.69

Receipt

Payroll Deduction: (57.69-
/Monthly)

SUBTOTAL of Receipts This Page (optional)

442.29

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)

David Santis

Mailing Address 4 Mill Dam Rd

City

Acton

State

MA

Zip Code

01720-5841

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

VP Supply Chain Mgt & Tech Srv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.06

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 8

Transaction ID: 90113.C451

Amount of Each Receipt this Period

76.92

Receipt

Payroll Deduction: (76.92-
/Monthly)

B.

Full Name (Last, First, Middle Initial)

David Santis

Mailing Address 4 Mill Dam Rd

City

Acton

State

MA

Zip Code

01720-5841

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

VP Supply Chain Mgt & Tech Srv

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.44

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C505

Amount of Each Receipt this Period

115.38

Receipt

Payroll Deduction: (115.3-
8/Monthly)

C.

Full Name (Last, First, Middle Initial)

Kim Sonnen

Mailing Address 240 S Madison St

City

Denver

State

CO

Zip Code

80209-3010

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation

SVP Marketing & Managed Care

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1820.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C507

Amount of Each Receipt this Period

390.00

Receipt

Payroll Deduction: (390.0-
0/Monthly)

SUBTOTAL of Receipts This Page (optional)

582.30

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Fresenius Medical Care North America PAC

A.

Full Name (Last, First, Middle Initial)

Liam Walsh

Mailing Address 5809 Chatham Ln

City

The Colony

State

TX

Zip Code

75056-7109

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
VP Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2153.20

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C511

Amount of Each Receipt this Period

461.40

Receipt

Payroll Deduction: (461.4-
0/Monthly)

B.

Full Name (Last, First, Middle Initial)

Paul Zabetakis

Mailing Address 38 Westwind Drive

City

Jamestown

State

RI

Zip Code

02835-1001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Fresenius Medical Care NA

Occupation
President Renal Research

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

M M / D D / Y Y Y Y
1 2 / 3 1 / 2 0 0 8

Transaction ID: 90113.C512

Amount of Each Receipt this Period

300.00

Receipt

Payroll Deduction: (300.0-
0/Monthly)

SUBTOTAL of Receipts This Page (optional)

761.40

TOTAL This Period (last page this line number only)

4642.31